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Rural District of Horncastle

ANNUAL REPORT

of the

Medical Officer of Health

1972

HORNCASTLE RURAL DISTRICT COUNCIL

Annual Report of the Medical Officer of Health 1972

PUBLIC HEALTH OFFICERS OF THE COUNCIL

Medical Officer of Health

S.A. O'HAGAN, M.B., B.S., D.P.H., M.F.C.M.

Chief Public Health Inspector

G.E. DAUBNEY, M. R.S.H., M.A.P.H.I.

Deputy Public Health Inspector

R. KNOX, M.A.P.H.I.

Meat Inspector

E. STONES, M.A.M.I., M. Ins. M., A.M.R.S.H.

The Medical Officer of Health is also Medical Officer for Horncastle and Woodhall Spa Urban District Councils and Welton Rural District Council.

The General Purposes Committee deals with matters affecting Public Health.

Members of the Committee :-

E.E. Andrew	G.C. Harvey	J.Palmer
A.L. Applewhite	J.C. Harvey	J.R.D. Periam
B. Benson-Brown	F.J.W. Height	G.J.B. Read
Dr. W.B.Browne	R.H. Hill	Mrs. A.M.Redshaw
Mrs. M.Bryant	G.H. Hodgson	F.W. Robinson
P. Carter	S.E. Howden	C.F. Roe
G.H.Chester	J.C. Hoyes	Dr. W.P.Roe
J.W. Dales	A.D. Lea	H.K. Taylor
F.A. Duddles	H. Leggate	Rev. G.O.Whitfield
Lt. Col.F.C.Hallowes	J.C. Marshall	

To The Chairman and Members
Horncastle Rural District Council.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1972.

It would appear that this year's report will be a swan song not only for me but for all my colleagues who have held office as Medical Officer of Health, for there is no place in Local Government after reorganisation for any such person.

To whom the public will go with their real or fancied grievances for a traditionally sympathetic ear and, I hope, sensible advice, will be a mystery for some time to come. Inevitably the stature of the Director of Environmental Services will expand like anything else placed in a vacuum until it fills the whole available space. This assumes that the role is not already too rigidly confined.

At the time of writing, the reorganisation of the National Health Service lags far behind that of Local Government and is virtually no more than a series of inspired guesses as far as Lincolnshire is concerned.

Ignoring Humberside, as a new, separate county, the rest of Lincolnshire is envisaged as one National Health Service Area, divided into two "Districts" based on the Lincoln and Boston Hospital groups respectively, by a line winding more or less deviously from Long Bennington to the vicinity of Hogsthorpe. There is likely to be a Community Physician at "Area" and at "District" but the Health Service Districts bear no relation to the Local Government Districts. Each National Health Service District will comprise several Local Government Districts and it is assumed that when the Local Government District Councils find themselves in need of medical advice, this would be sought from the District Community Physician.

At the moment, there is a technical hazard to the community from both Smallpox and Cholera. The latter risk is infinitesimal because of the excellent sanitary arrangements over the greater part of Britain, though the unconnected houses near sewage schemes remain a potential threat to everybody. I must re-iterate the advice I gave to the Council last year and again urge them to get all possible house connections made without delay. The River Authority is already getting tough over Tetford works which is inefficient because it is not getting the load for which it was designed and your Consultants are proposing further expenditure which might not have been necessary had the slaughterhouse effluent been suitably diluted by the full volume of house effluent for which the works was designed.

A programme has been made for sewering all practicable habited areas of the district during the next few years. Whether the No.2 District will accept the programme is uncertain, since other Rural Districts have similar programmes to wish on to the new Authority. It is not now certain that the new District will have authority to prepare sewage schemes and certainly they will be heavily overshadowed by the Regional Water Authority which is likely to take the sewage at the invert of the works and is likely to impose conditions on the quality and quantity of sewage to be accepted.

I referred last year to food poisoning and drew attention to non-infective poisoning by the food itself, with special reference to alcohol. Looking through the causes of death in the district one is once again struck by the incidence of ischaemic heart disease which accounts for one third of all deaths in the district. There are many doctors who would say the seeds of this disease may be sown in infancy and childhood by unwise feeding. Perhaps the export of vast quantities of surplus butter to Russia may not be wholly unwise, especially if payment can be made in sunflower oil. A great deal more is being learnt in the field of athero-sclerosis but it would be half a lifetime before todays research has a noticeable effect on the death-rate.

Reverting to the national policy on smallpox, it would seem that Professor George Dick's theories, sound as they appear, are undergoing yet another acid test. If we are not to have universal, regular three-yearly vaccination, with its attendant risks, then the price must be eternal vigilance, not only at ports and airports, but by doctors throughout the land who must never relax their question to every febrile patient - where have you been in the last fortnight ? - and what is your job ?
Even then, freedom from secondary cases will depend on ensuring that any undiagnosed fever or rash is treated as smallpox until a firm diagnosis is made.

Locally, trouble was again encountered with the problem of smell from the Bait Breeding premises, though a number of improvements have been made. The problem of providing a tolerable working environment in the premises may not yet have been solved - obviously, taking the roof off would give them fresh air at the expense of their neighbours and the system of passing the foul air through filters kept constantly sprayed with suitable chemicals has done much to alleviate the trouble for both workers and neighbours.

I have, however, recently seen a similar factory in which ultra-violet lamps were used to generate ozone and thereby destroy the odour within the premises. From the account given by the Public Health Inspector for that district, the improvement is near-miraculous. It is fair, however, to say that these premises are remote from dwellings and the main complaints came from the users of road A16 at a distance of half a mile or so. A modest degree of improvement might have sufficed in that case, although when I visited, admittedly in cool weather, I was impressed by the lack of serious smell in the actual works.

The only proof of whether this system would work in our instance would be by actual trial at a cost between £500. and £1000. In the long run it might well be cheaper than the elaborate fans and filters already installed.

Complaints of smell nuisance have also been received from the conveyance of poultry slurry in tankers that were not leakproof. This, however, was easily remedied, but not the smell from the sprayed land.

Aside from my purely district functions, much of my time has been occupied in assisting parents in their relations with their children, from birth through adolescence and these problems will need to be tackled efficiently by whoever inherits the responsibility next year. It needs sympathy and free-time as well as the basic knowledge, since one often has to devote several two-hour sessions to a single case. It would be impossible if I did not enjoy a degree of antonomy in my work and a correspondingly increased load would be passed to the Psychiatrist, although it is distinctly "fringe" psychiatry.

The year was marked by the Tupholme Pop Festival at Whit week-end. The event was a flop because of the appalling weather but it demonstrated the ability of local council's officers to work together in an emergency. Forecasts of up to 200,000 attending were shattered but I have little doubt that the resources could just have coped with that number! Nevertheless, it did cause great stress on councillors and officers alike and all were glad when its last traces had gone. Inevitably the question of drug-pushing arose, and the drug squad was there in force. From that point of view the Festival drew the pushers like Moths to a lamp and enabled the police to concentrate their efforts on a known target. The abuse of drugs by the young is serious because in the next forty years a proportion will progress from the soft to the hard drugs with the terrible sordid story of degradation and crime that goes with it. If the elderly "took to smoking pot" to while away boring hours or make lonely existence bearable, this would continue to be an indictment of the society that left them thus, but they could hardly destroy their lives and those of others in the way that youngsters can do. We have, however, constructed a society with material needs largely met by a comparitively small proportion of working time, and we do not, as yet have the knowledge or initiative to utilize the rest of our lives in a satisfying way. Most activities involve materials, and the resources of materials in the planet are not endless, so that reclamation becomes constantly more important. The fuel supplies of the world are being rapidly exhausted, so we must minimise our demand for light and heat to the level below which a real deterioration of life begins.

The phenomenal wastage of an average of 15 cwt. of iron etc. being used regularly to transport about 1½ cwt. of human being by private car is the classic example, matched only by the driving of empty buses on a leisurely ineffective schedule allegedly compensating for the derelict railroads. The ultimate in unplanned transport chaos is seen in London whenever a rail strike occurs, but as near as Lincoln, cars are so unwelcome that one has to pay for parking farther and farther from ones destination, whilst road improvements destroy thousands of acres of land formerly producing food. Little of the derelict railway land has yet been returned to really productive farm-land. The price of beef has driven many people to look at alternatives - poultry, pork and lamb. The mountain or hill sheep has the merit of producing food where little else can be grown but poultry and pork create a big demand for manufactured feeds and so are inherently expensive. Fish too is increasing in price because of scarcity but here the problems are international and the ecology is very poorly understood. Fish cannot be counted as sheep going through a gate and it is usually only when catches become reduced that there is evidence that something is wrong. By that time it has been seriously wrong and may demand drastic action to restore the stocks. I believe the Icelanders have a good case and personally feel it to be a pity that they have not chosen to prove it to the world before the International Court. In the long term, international agreement on protection of fish stocks is quite essential, and it may eventually be possible to farm fish in much the same way as hill-sheep - by providing protected pastures for breeding and turning them loose in the uncultivated places to grow. Harvesting them is a problem, since short of tagging every young fish the "ownership" of a catch must rest with the catcher.

Whilst the fertility of the land and sea is being questioned we ought also to question the fertility of the consumer - for generations some restrictions have been effected on human fertility but this has not usually been adequate, since the previous controlling factor of childhood deaths has been virtually removed. In planning human ecology, there is little reason for parents to do more than replace themselves in the next generation. An excess of 10% would compensate for the unfortunate childless marriages but these might be better produced by allowing some unwanted and aborted pregnancies to go to term and produce health babies for the childless couples to adopt. At the same time, one would wish, as far as possible, that medical science should be able to bring down the number of cases of infertility. This, coupled with further attempts to prevent premature deaths would tend to the overall well being of the human population. For some decades, however, at least we shall be have to live with a high proportion of people who are regarded as too old to work and thus deprived of one of the principal pleasures of life. Eventually we may be able to so improve the physical and mental state of the elderly that they can live a full life almost to the end. Such a case was our most respected Alderman T.W. Scholey whose recent death we can only record as "full of years and of honour".

Medical science is now able to maintain vital processes in very grossly injured bodies which formerly would have quickly died. We are thus producing an increasing number of handicapped people of all ages. Many can live in ordinary homes. Some could be accommodated in modified ordinary houses - some of the early post-war council houses could be economically converted; but some are born to and others are brought by accident or disease to a life of considerably dependancy - even to total helplessness. Some, however, with great strength of character and also the privilege of education and some economic independence can show a phenomenal ability to cope not only with their own problems but by their example, others. The names of Douglas Bader and Lady Masham are famous in this field and fittingly complement that of Leonard Cheshire, V.C. in this field which has, until recently been a field of distinct under-privilege. Nevertheless, a climate is developing in which, in an over-populated world and with so many potentially healthy lives being terminated by abortion, it is being questioned whether heroic measures to preserve existence may perhaps be the outcome of inadequate courage to face the alternative.

This year has not brought much in the way of infectious disease to the district. Of some 200 children born each year, measles now attackes 30 - 40 instead of, as formerly, being almost universal. Scarlet Fever, of a mild variety has been more commonly notified in the past two years but has never occurred as an "out-break". The mass media have a valuable place in controlling epidemics, such as influenza, in advising the patient without complication to treat himself, avoid spreading it, and only send for medical aid if things do not seem to be going properly. Unfortunately, bad news is always sensational and so tends to steal the thunder. The recent three cases of smallpox in London have received phenomenally more attention than the absence of smallpox in the other 50 millions of the population for years on end ! I can see no answer to this phenomenan nor to the mass hysteria and clamcur for unnecessary vaccination, other than forthright statements promptly issued by the Department of Health & Social Security and authoritively supported by community physicians at all levels.

Meanwhile the places, other than virology laboratories, where it is possible to contract smallpox, are becoming fewer and the disease may well become extinct in our lifetime.

Measles has remained at an almost satisfactory low level for four succesive years, instead of recurring in alternate years. It would be pleasant to think that this is the effect of immunization which has been pushed ahead in Lindsey, despite the opposition of a few general practitioners. Nationally, the disease is in epidemic form again this year (1973) and it will remain to be seen whether Lindsey again escapes.

May I, in concluding this final report, the twentieth, thank all the Members of the Council, especially those who have borne office, together with the Officers and employees of the Council who have worked so happily with me for so long, and to wish them well in the future organization.

I am,
Your obedient Servant,

Medical Officer of Health.

STATISTICS

AREA OF RURAL DISTRICT :	114.629 acres
REGISTRAR GENERAL'S ESTIMATE OF MID-YEAR RESIDENT POPULATION :	14,860 persons
DENSITY OF POPULATION	0.13 persons per acres

NUMBER OF INHABITATED HOUSES :

PERMANENT	4930	Last years figures - no up to date ones available.
CARAVANS	445	

VITAL STATISTICS

Live Births	Male	Female	Total
	98	95	193
			E & W
Rate per 1000 population	13.0	crude	14.8
Ratio of locally adjusted birth rate to national rate	0.90		
Illegitimate Live Births per cent of total live births	3%		9%

Still Births	Male	Female	Total	
	1	1	2	
Rate per 1000 live births	10			12
Total live and still births	99	96	195	
Infant deaths	0	3	3	
Infant mortality Rate per 1000 live births			5	17
Infant Mortality Rate per 1000 live births legitimate			5	17
Infant Mortality Rate per 1000 live births illegitimate			0	21
Neonatal Mortality Rate (deaths under 4 weeks per 1000 total live births)			5	12
Eraly Neonatal Mortality Rate (deaths under 1 week per 1000 total live births)			5	10
Perinatal Mortality Rate (still births and deaths under 1 week combined per 1000 total live and still births)			15	22
Maternal Mortality (including abortion) number of deaths			0	
Rate per 1000 total live and still births			0	

Deaths	Male	Female	Total	
	70	61	131	
				England & Wales
Death Rate per 1000 living actual (crude)			8.8	12.1
Ratio of local adjusted death rate to national Rate			0.79	
Locally adjusted Rate			9.6	

DEATHS UNDER THE AGE OF 65 YEARS

Stomach Cancer	1	
Intestine Cancer	1	
Lung Cancer	9	
Larynx Cancer	1	
Other Cancers	4	
Ischaemic Heart Disease	10	
Other Diseases of Circulatory System	1	
Bronchitis	1	
Genito-Urinary	2	
Cirrhosis of Liver	1	(Congenital)
Birth Injury etc.	1	
Motor Vehicle Accidents	5	
Suicide	1	
Diabetes	1	

Male 24 Female 15

Prevalence of and Control over Infectious Diseases

	1969	1970	1971	1972
Scarlet Fever	0	1	12	6
Infective Hepatitis	1	1	1	2
Encephalitis	2	0	1	0
Salmonellosis	0	0	1	0
Dysentery	0	0	0	1
Whooping Cough	0	4	5	1
Measles	8	12	33	39

County Health Services :

No significant change took place during the year.

The National Health Service

No significant changes have been made in the service though the need for additional eye clinics has continued and been met sporadically.

Recently it has been shown that Saturday morning clinics are surprisingly well attended.

Cause of Death as shown in the Registrar General's Short List

List No.	Cause of Death	Sex	Total All Ages	Under 4 Weeks	4 Weeks and under 1 year	Age in years								
						1 -	5 -	15 -	25 -	35 -	45 -	55 -	65 -	75 & Over
B5	Tuberculosis of Respiratory System	M	1	-	-	-	-	-	-	-	-	-	1	-
		F	-	-	-	-	-	-	-	-	-	-	-	-
B19 (2)	Malignant Neoplasm, Oesophagus	M	-	-	-	-	-	-	-	-	-	-	-	-
		F	1	-	-	-	-	-	-	-	-	-	-	1
B19(3)	Malignant Neoplasm, Stomach	M	1	-	-	-	-	-	-	-	-	1	-	-
		F	-	-	-	-	-	-	-	-	-	-	-	-
B19(4)	Malignant Neoplasm, Intestine	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	1	-	-	-	-	-	-	-	-	1	-	-
B19(5)	Malignant Neoplasm, Larynx	M	1	-	-	-	-	-	-	-	-	1	-	-
		F	-	-	-	-	-	-	-	-	-	-	-	-
B19(6)	Malignant Neoplasm, Lung, Bronchus	M	8	-	-	-	-	-	-	-	-	6	2	-
		F	4	-	-	-	-	-	-	1	1	1	1	-
B19(7)	Malignant Neoplasm, Breast	M	-	-	-	-	-	-	-	-	-	-	-	-
		F	1	-	-	-	-	-	-	-	1	-	-	-
B19(8)	Malignant Neoplasm, Uterus	F	1	-	-	-	-	-	-	-	-	-	-	1
B19(10)	Leukaemia	M	-	-	-	-	-	-	-	-	-	-	-	-
		F	1	-	-	-	1	-	-	-	-	-	-	-
B19(11)	Other Malignant Neoplasms	M	4	-	-	-	-	-	-	-	-	1	-	3
		F	2	-	-	-	-	-	-	-	1	-	-	1
B21	Diabetes Mellitus	M	-	-	-	-	-	-	-	-	-	-	-	-
		F	1	-	-	-	-	-	-	-	-	1	-	-
B23	Anaemias	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	-	-	-	-	-	-	-	-	-	-	-	-
B27	Hypertensive Disease	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	-	-	-	-	-	-	-	-	-	-	-	-
B28	Ischaemic Heart Disease	M	22	-	-	-	-	-	-	2	1	4	7	8
		F	18	-	-	-	-	-	-	-	1	2	8	7
B29	Other Forms of Heart Disease	M	1	-	-	-	-	-	-	-	-	-	1	-
		F	6	-	-	-	-	-	-	-	-	-	1	5
B30	Cerebrovascular Disease	M	9	-	-	-	-	-	-	-	-	-	4	5
		F	10	-	-	-	-	-	-	-	-	-	4	6
B46(6)	Other Diseases of Circulatory System	M	3	-	-	-	-	-	-	-	-	-	-	3
		F	6	-	-	-	-	-	-	-	-	1	1	4

List No.	Cause of Death	Sex	Total All Ages	Under 4 Weeks	4 Weeks & under 1 year	Age in years								
						1 -	5 -	15 -	25 -	35 -	45 -	55 -	65 -	75 & over
B 31	Influenza	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	-	-	-	-	-	-	-	-	-	-	-	-
B 32	Pneumonia	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	4	-	-	-	-	-	-	-	-	-	-	4
B33(1)	Bronchitis and	M	1	-	-	-	-	-	-	-	-	1	-	-
	Emphysema	F	-	-	-	-	-	-	-	-	-	-	-	-
B46(7)	Other Diseases of	M	1	-	-	-	-	-	-	-	-	-	1	-
	Respiratory System	F	-	-	-	-	-	-	-	-	-	-	-	-
B 36	Intestinal Obstruction	M	-	-	-	-	-	-	-	-	-	-	-	-
	and Hernia	F	1	-	-	-	-	-	-	-	-	-	-	1
B 37	Cirrhosis of Liver	M	1	-	-	-	1	-	-	-	-	-	-	-
		F	-	-	-	-	-	-	-	-	-	-	-	-
B46(8)	Other Diseases of	M	1	-	-	-	-	-	-	-	-	-	1	-
	Digestive System	F	-	-	-	-	-	-	-	-	-	-	-	-
B 39	Hyperplasia of Prostate	M	3	-	-	-	-	-	-	-	-	-	-	3
B46(9)	Other Diseases,	M	2	-	-	-	-	-	-	-	1	-	-	1
	Genito-Urinary System	F	1	-	-	-	-	-	-	-	-	1	-	-
B 43	Birth Injury,	M	-	-	-	-	-	-	-	-	-	-	-	-
	Difficult Labout,etc.	F	1	1	-	-	-	-	-	-	-	-	-	-
B 45	Symptoms and Ill	M	-	-	-	-	-	-	-	-	-	-	-	-
	Defined Conditions	F	1	-	-	-	-	-	-	-	-	-	-	1
BE47	Motor Vehicle Accidents	M	4	-	-	-	-	1	-	2	1	-	-	-
		F	1	-	-	-	-	1	-	-	-	-	-	-
BE48	All other Accidents	M	1	-	-	-	-	-	-	-	-	-	-	1
		F	-	-	-	-	-	-	-	-	-	-	-	-
BE49	Suicide and Self-	M	1	-	-	-	-	-	-	-	-	1	-	-
	Inflicted Injuries	F	-	-	-	-	-	-	-	-	-	-	-	-
	TOTAL ALL CAUSES	M	70	-	-	-	1	1	-	4	3	15	17	29
		F	61	1	-	-	1	1	-	1	4	7	15	31

SANITARY CIRCUMSTANCES OF THE DISTRICT

Water Supplies :

The supply has in general been satisfactory, although long-standing difficulties at the high points of Edlington and Fulletby have not been fully overcome. A water tower has been erected at Fulletby which ought to meet that difficulty and a similar provision of storage capacity at Edlington has been recommended. The sources of supply in the area are being severely tested by the increased demand.

Housing :

There is again no major public building to report.

Refuse Collection :

Progress towards total sack collection remains the intention but progress is regrettably slow, and the service remains notably inferior to that of neighbouring areas.

Food Hygiene :

The year has again passed without any outbreak of food poisoning.

Food hygiene control was given a severe testing in the improvised conditions of the Pop Festival. Adequate forethought and collaboration between the caterers and the Public Health inspectorate resulted in the sale of foods that were inherently safe under the prevailing conditions. This could not truthfully be said of a neighbouring area where major functions were causes of entirely preventable outbreaks. The utter respectability of the catering organizations prevented suspicion and it is upon the index of suspicion that safety depends.

Sewerage and Sewage Disposal :

A programme of new works and sewers has been devised to give guidance to the New District Authority.

It is most regrettable that despite the spending of very great sums of money, many properties are still not connected to the public sewers and the authority is now faced with prosecution because an adequate works was provided but the Council did not see fit to make house connections as part of the contract and so dilute the inflow to the works to the level for which the Consultants designed.

FOOD AND DRUGS ACT, 1955

(a) Milk Supplies - Brucella Abortus

Milk sampling is performed by the County Authority and any positive results communicated to me.

(b) Liquid Egg (Pasteurization) Regulation, 1963

There is no such plant in the district.

(c) Food Hygiene (General) Regulations, 1960

Trade	Number complying with Reg. 16	Number to which Reg. 19 applies	Number fitted to comply with Reg. 19
General Dealers	39	-	-
Hotels	10	10	10
Public Houses	24	24	24
Wrapped sweets and ice cream	13	-	-
Confectioners	1	-	-
Greengrocers	3	-	-
Butchers	9	9	9
Slaughterhouses	5	5	5
Cafes	9	9	9
Fish and Chip Shops	4	4	4
Bakehouses	2	2	2
Private Clubs	1	1	1
Factory Canteens	3	3	3

(d) Poultry Inspection

No poultry processing premises operate in the Rural District.

Common Lodging Houses

None has ever, to my knowledge, existed in Horncastle Rural District.

UNSOUND FOOD

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR PART

	CATTLE EXCLUDING COWS	COWS	CALVES	SHEEP AND LAMBS	PIGS
Number killed Number inspected	1192 1192	130 130	6 6	4199 4199	3211 3211
All diseases except Tuberculosis and Cysticerci	3	2	3	18	8
Carcases of which some part or organ was condemned	114	71	0	319	273
Tuberculosis only whole carcases condemned.	0	0	0	0	0
Carcases of which some part or organ was condemned	0	0	0	0	4
% of the number inspected affected with tuberculosis	0	0	0	0	.8
Cysticerosis Carcases of which some part or organ was condemned	2	0	0	0	0
Carcases submitted to treatment by refrigeration	2	0	0	0	0
Generalised and totally condemned	0	0	0	0	0

OTHER FOOD CONDEMNED - None.

FACTORIES ACT, 1961

Inspections for purposes of provisions as to health (including Inspections made by Public Health Inspector)

	Number on Register	Number of Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories in which Secs. 1 - 4 & 6 to be enforced by Local Authority	0	0	0	0
(ii) Factories not included in (i) in which section 7 is enforced by the Local Authirity	46	9	0	0
(iii) Other premises in which Sec. 7 is enforced by Local Authority	18	14	0	0
TOTAL	64	23	0	0

All other Sections - Nil.